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| THOMAS, KAY 100 GALLERIA I STE 1750 | EY, LLP I S ac tr | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | | | |
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| | | | L | | | | (Date) |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTO | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. |
| 10/807,132 TITLE OF INVENTION: (| 03/22/2004 GLASS MOLDING DIE A | Jui-Fen Pai ETHOD THEREOF | | 25011 | 2-1080 | 3684 | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DU | E PREV. PAID ISSU | IE FEE TO | TAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1400 | \$300 | \$0 | | \$1700 | 06/22/2007 |
| EXAMIN | IER | ART UNIT | CLASS-SUBCLASS | 7 | | | |
| FLETCHER III, WILLIAM P | | 1762 | 427-142000 | _ | | | |
| Address form PTO/SB/I "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless | ation (or "Fee Address" In or more recent) attached. D RESIDENCE DATA T | or agents OR, alterna (2) the name of a sin registered attorney o 2 registered patent at listed, no name will listed, no name will listed | Thomas, Kayden, ents OR, alternatively, ne name of a single firm (having as a member a tered attorney or agent) and the names of up to istered patent attorneys or agents. If no name is i, no name will be printed. TENT (print or type) If appear on the patent. If an assignee is identified below, the document has been filed for itute for filing an assignment. | | | | |
| (A) NAME OF ASSIGN ASIA OPT | NEE PICAL COU, II | NC. | (B) RESIDENCE: (CIT | Y and STATE OR O | , R.O. | | up entity Government |
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| Authorized Signature | Dental C | 2 / | Office. | Date Api | -i1 K. | 2017 | ? |
| Typed or printed name | Daniel R. I | McClure | | Registration 1 | | | |
| This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313 Under the Paperwork Reduction | 1150. | | | | | | |

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